

CRA-Applications@Michigan.gov



ATTESTATION I CONFIRMATION OF SECTION 205 COMPLIANCE PART 1: MUNICIPALITY

(To be completed by the municipal clerk or their designee and submitted by the applicant)

Do not sign until notary is present

Proposed	d Facility Name:				
Proposed	d Facility Address:				
Proposed	d Facility Type:				
I,		(clerk/designee) of	(municipality),	
attest to	and confirm the following:				
1.	The municipality has adopte	ed an ordinance under sec	etion 205 of the MMFLA.		
2.	The following regulations and ordinances within the municipality, including zoning ordinances, will apply to the proposed medical marijuana facility (identify and briefly describe):				
3.	The proposed facility is in coordinances.	ompliance with all regul	ations and ordinances within t	he municipality, including zoning	
4.			ory Agency (CRA) any change e Medical Marihuana Facilitie	es to any municipal ordinance that s Licensing Act (MMFLA).	
5.	The municipality will report ordinances, including zoning		tions by the proposed facility	of any municipal regulations or	
Clerk (or d	lesignee) Signature	Clerk (or design	ee) Email Address	Date	
Subscribe	ed and sworn to by	(GLUB : N	before me		
		(Clerk/Designee Name)		(Date)	
(Notary Pub	lic Signature)		(Notary Public Printed Name)		
State of_	, Count	y of	Acting in the county of	(County) (State)	
	nission exnires			()	

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CANNABIS
REGULATORY AGENCY

Medical Facilities Licensing | Licensing Division P.O. Box 30205, Lansing, MI 48909 Telephone: 517- 284-8599 CRA-Applications@Michigan.gov

ATTESTATION I CONFIRMATION OF SECTION 205 COMPLIANCE PART 2: APPLICANT

(To be completed and submitted by the applicant)

Proposed Facility Name:					
Proposed Facility Address:					
Proposed Facility Type:					
Municipality:					
On behalf of		, I			
	Name of Main Applicant	Name & Title of Individual Authorized	l to Sign on Behalf of Main Applicant		
am authorized to sign this att confirm the following:	testation on behalf of the proposed m	edical marijuana facility identif	ied above and attest to and		
 The municipality in MMFLA. 	n which the proposed facility is to be	located has adopted an ordinane	ce under section 205 of the		
2. The proposed facili ordinances.	Cacility is in compliance with all regulations and ordinances within the municipality, including zoning				
	he proposed facility will report to the Cannabis Regulatory Agency (CRA) any changes to any municipal ordinance nat the municipality has adopted under Section 205 of the Medical Marihuana Facilities Licensing Act (MMFLA).				
	ity will report to the CRA any violationg zoning ordinances.	ons by the proposed facility of a	ny municipal regulations or		
Authorized Individual Signature		_	Date		

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